

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

Bayonne Sanitary Landfill

76

Site Name

Site ID Number

North Hook Road

Bayonne, NJ

Address

City, State

Date of Off-Site Reconnaissance February 27, 1985

SITE DESCRIPTION

The Bayonne Sanitary Landfill was used by Exxon from 1877 to 1972 to dispose their organic chemicals and oily wastes from their refinery. Exxon reports the dump area comprised 200 acres. Bayonne took over 62 acres of the site and operated it as a sanitary landfill. The city accepted municipal and industrial wastes; hazardous wastes were reportedly dumped illegally on-site. During inspections, NJDEP found the site lacking adequate daily cover and waste material in contact with the Kill Van Kull.

PRIORITY FOR FURTHER ACTION: High ☒ Medium ☐ Low ☐ None ☐

RECOMMENDATIONS

The level of state involvement at this site is unknown. Based on the magnitude of the past disposal practices an immediate site inspection is warranted. Test borings, surface soil samples, and groundwater monitoring are strongly recommended.

Prepared by: Yasmin Alibhai

Date: February 28, 1985

Of: JRB Associates



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1-SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE NJ 02 SITE NUMBER 76

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) Bayonne Sanitary Landfill		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER North Hook Road			
03 CITY Bayonne	04 STATE NJ	05 ZIP CODE 07002	06 COUNTY Hudson	07 COUNTY CODE	08 CONG. DIST.
09 COORDINATES LATITUDE 40 38 50.0		LONGITUDE 74 08 10.0		BLOCK 231 1/2 LOT 3E1	

10 DIRECTIONS TO SITE (Starting from nearest public road) NJ Turnpike to exit 14 which exits onto Avenue E Follow Avenue E to 21st street turn left. 21st street becomes Hook Road then 22nd Street. Make a left on Avenue J and Right onto North Hook Road

III. RESPONSIBLE PARTIES

01 OWNER (if known) City of Bayonne		02 STREET (Business, mailing, residential) 630 Avenue C			
03 CITY Bayonne	04 STATE NJ	05 ZIP CODE 07002	06 TELEPHONE NUMBER (201) 8588152		
07 OPERATOR (if known and different from owner)		08 STREET (Business, mailing, residential)			
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER ()		

13 TYPE OF OWNERSHIP (Check one)

☐ A. PRIVATE ☐ B. FEDERAL ☐ C. STATE ☐ D. COUNTY ☒ E. MUNICIPAL
(Agency name)
☐ F. OTHER ☐ G. UNKNOWN
(Specify)

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)

☐ A. RCRA 3001 DATE RECEIVED: MONTH DAY YEAR ☒ B. UNCONTROLLED WASTE (CERCLA 103c) DATE RECEIVED: 6/5/81 MONTH DAY YEAR ☐ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE numerous MONTH DAY YEAR <input type="checkbox"/> NO		BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER (Specify)			
CONTRACTOR NAME(S)					

02 SITE STATUS (Check one) <input type="checkbox"/> A. ACTIVE <input checked="" type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN	03 YEARS OF OPERATION 1877 1983 BEGINNING YEAR ENDING YEAR <input type="checkbox"/> UNKNOWN
--	--

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED

From 1877 to 1972 Exxon dumped organic chemicals and oily wastes from their refinery. From 1972 to 1983, the site was operated as a municipal landfill with illegal dumping of chemicals reported. (Attachments A - D)

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

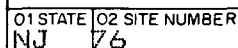
Serious potential existed for contamination of all media plus population exposure to fumes from on-site fires. (Attachments A thru F)

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste information and Part 3 - Description of Hazardous Conditions and Incidents)
☒ A. HIGH (inspection required promptly) ☐ B. MEDIUM (inspection required) ☐ C. LOW (inspection on time available basis) ☐ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT Fred Schmitt	02 OF (Agency/Organization) NJDEP/BEERA	03 TELEPHONE NUMBER (609) 2921215			
04 PERSON RESPONSIBLE FOR ASSESSMENT Yasmin Alibhai	05 AGENCY	06 ORGANIZATION JRB Assoc.	07 TELEPHONE NUMBER 201-5990100	08 DATE 2/28/85 MONTH DAY YEAR	

☐ M. NOT APPLICABLE



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3-DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE NJ 02 SITE NUMBER 76

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☒ A. GROUNDWATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☒ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

The landfill is discharging leachate. The site had been a dumping ground for chemicals for nearly 100 years. (Attachments A)

01 ☒ B. SURFACE WATER CONTAMINATION 02 ☒ OBSERVED (DATE: 3/10/82) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

NJDEP observed waste material to be in contact with Kill Van Kull. The site is situated in a marshy area along the river. The potential exists for leachate to enter the river. (Attachment A)

01 ☒ C. CONTAMINATION OF AIR 02 ☐ OBSERVED (DATE: _____) ☒ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

The site was Exxon's disposal ground for organic chemicals and refinery wastes. The number of fires reported also add to the potential of air pollution. (Attachments A and B)

01 ☒ D. FIRE/EXPLOSIVE CONDITIONS 02 ☒ OBSERVED (DATE: numerous) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

The Bayonne Fire Department reported that fires were a regular occurrence in the past. Due to the production of methane gas, explosions are a strong possibility. No venting system was observed. (Attachments A and B)

01 ☒ E. DIRECT CONTACT 02 ☐ OBSERVED (DATE: _____) ☒ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

NJDEP observed in March 1982, that most of the site lacked daily cover. On a separate occasion the entire site was observed to have material protruding from the cover. (Attachment E)

01 ☒ F. CONTAMINATION OF SOIL 02 ☐ OBSERVED (DATE: _____) ☒ POTENTIAL ☐ ALLEGED
03 AREA POTENTIALLY AFFECTED: 200 (Acres) 04 NARRATIVE DESCRIPTION

The site had been the disposal ground for Exxon's refinery wastes from 1877 to 1972. Until 1983, the site received dry sludge, and municipal wastes. Illegal dumping of organic solvents also occurred. (Att. A,C,D)

01 ☐ G. DRINKING WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☒ H. WORKER EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☒ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

Fires were a frequent occurrence at the landfill. During the fires injuries were not uncommon due to noxious fumes. (Attachment B)

01 ☒ I. POPULATION EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☒ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

The population around the landfill has been exposed to noxious fumes from the landfill wastes and from fires.



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3-DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE NJ 02 SITE NUMBER 76

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

01 ☐ K. DAMAGE TO FAUNA

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION (Include name(s) of species)

01 ☐ L. CONTAMINATION OF FOOD CHAIN

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

01 ☒ M. UNSTABLE CONTAINMENT OF WASTES

(Spills/runoff/standing liquids/leaking drums)

02 ☒ OBSERVED (DATE: 3/82)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

During site visits by NJDEP it was observed that the landfill lacked cover and that the wastes were protruding on the surface water. Exxon dumped refinery wastes on-site for 100 years. (Attachment A)

01 ☒ N. DAMAGE TO OFFSITE PROPERTY

02 ☒ OBSERVED (DATE: 3/10/82)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

During a site inspection, NJDEP observed waste material to be in contact with the Kill Van Kull. (Attachment E)

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

01 ☒ P. ILLEGAL/UNAUTHORIZED DUMPING

02 ☒ OBSERVED (DATE: 8/7/80)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

Two city employees were caught dumping drums at the landfill. (Attachment D-11)

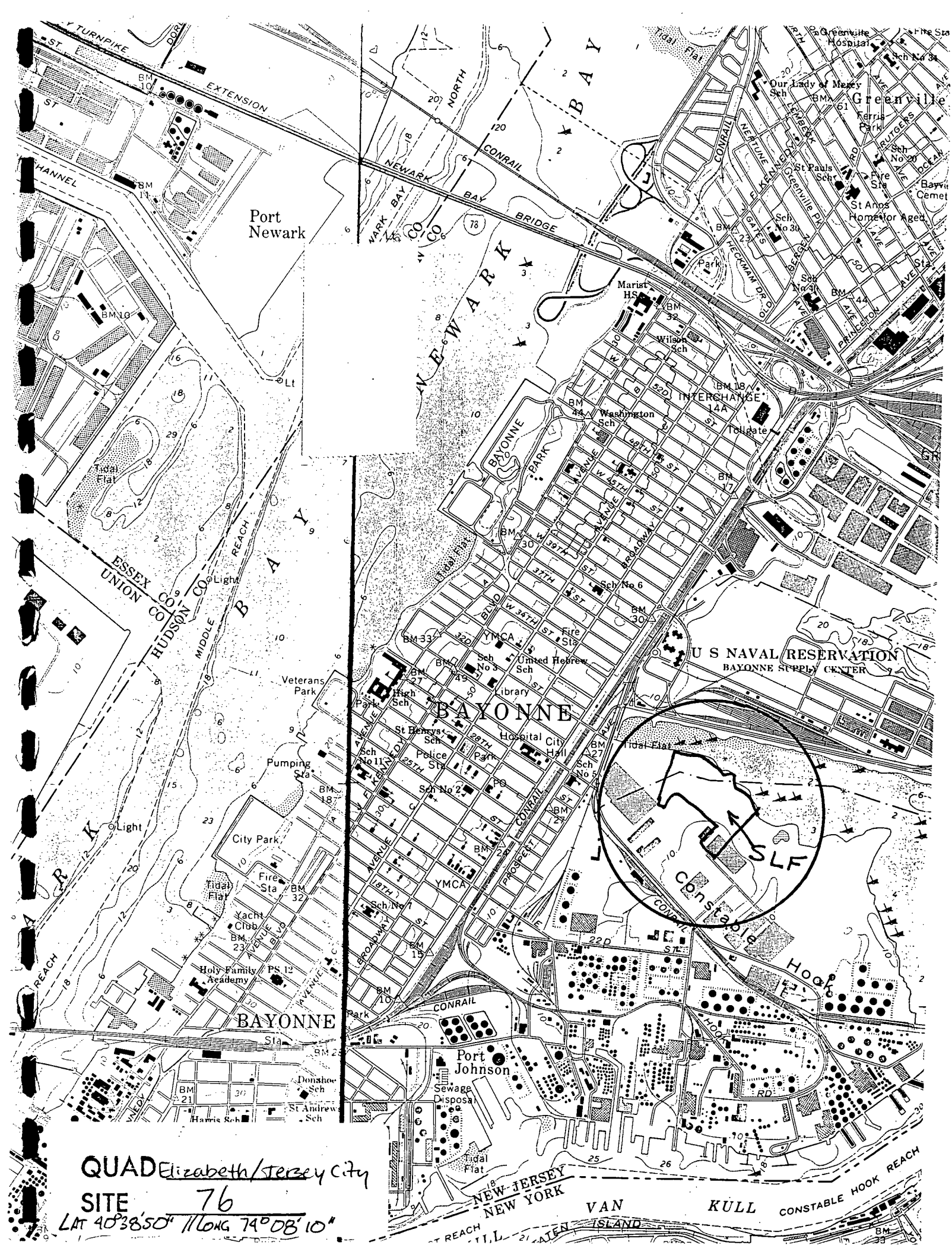
05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e.g. state files, sample analysis, reports)

NJDEP/DWR and DWM: Attachment B
USEPA Files: Attachment B



QUADE Elizabeth/Jersey City

SITE 76

LAT 40°38'50" N LONG 74°08'10" W

EPA Notification of Hazardous Waste Site

United States
Environmental Protection
Agency
Washington DC 20460

76

Attachment A-1

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981.

Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item which applies.

810608

NJS 000 001 240

Person Required to Notify:

Enter the name and address of the person or organization required to notify.

Name Exxon Company, U.S.A. (a Division of Exxon Corporation)
Street Foot of East 22nd Street
City Bayonne State NJ Zip Code 07002

B Site Location:

Enter the common name (if known) and actual location of the site.

Name of Site Bayonne City Dump
Street Lower Hook Road
City Bayonne County Hudson State NJ Zip Code 07002

NJD 980504849

Person to Contact:

Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form.

Name (Last, First and Title) Altreuter, R. K. - Environmental Coordinator
Phone (201) 474-7585

Dates of Waste Handling:

Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site.

From (Year) 1877 To (Year) 1972

E Waste Type: Choose the option you prefer to complete

Option 1: Select general waste types and source categories. If you do not know the general waste types or sources, you are encouraged to describe the site in Item I—Description of Site.

General Type of Waste:
Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.

- 1. ☒ Organics
- 2. ☒ Inorganics
- 3. ☐ Solvents
- 4. ☐ Pesticides
- 5. ☐ Heavy metals
- 6. ☐ Acids
- 7. ☐ Bases
- 8. ☐ PCBs
- 9. ☐ Mixed Municipal Waste
- 10. ☐ Unknown
- 11. ☒ Other (Specify)
(Oily wastes from petroleum refining)

Source of Waste:
Place an X in the appropriate boxes.

- 1. ☐ Mining
- 2. ☐ Construction
- 3. ☐ Textiles
- 4. ☐ Fertilizer
- 5. ☐ Paper/Printing
- 6. ☐ Leather Tanning
- 7. ☐ Iron/Steel Foundry
- 8. ☒ Chemical, General
- 9. ☐ Plating/Polishing
- 10. ☐ Military/Ammunition
- 11. ☐ Electrical Conductors
- 12. ☐ Transformers
- 13. ☐ Utility Companies
- 14. ☐ Sanitary/Refuse
- 15. ☐ Photofinish
- 16. ☐ Lab/Hospital
- 17. ☐ Unknown
- 18. ☒ Other (Specify)

(Petroleum Refinery)

Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001 regulations (40 CFR Part 261).

Specific Type of Waste:
EPA has assigned a four-digit number to each hazardous waste listed in the regulations under Section 3001 of RCRA. Enter the appropriate four-digit number in the boxes provided. A copy of the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site is located.

ATTACHMENT A-1

400
A1

Waste Quantity:

Place an X in the appropriate boxes to indicate the facility types found at the site.

In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site in cubic feet or gallons.

In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.

Facility Type

1. ☐ Piles
2. ☐ Land Treatment
3. ☒ Landfill
4. ☐ Tanks
5. ☐ Impoundment
6. ☐ Underground Injection
7. ☐ Drums, Above Ground
8. ☐ Drums, Below Ground
9. ☐ Other (Specify) _____

Total Facility Waste Amount

cubic feet 700,000 (rough estimate)

gallons _____

Total Facility Area

square feet _____

acres 200 A

Known, Suspected or Likely Releases to the Environment:

Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.

☐ Known ☒ *Suspected ☐ Likely ☐ None

Note: Items H and I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.

Sketch Map of Site Location: (Optional)

Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.

*Since the facility contains a previous landfill, it is suspected that such facility over time will have some degree of leachate migration.

SEE ATTACHMENT

Description of Site: (Optional)

Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.

The Bayonne City Dump site is located on approximately 200 acres in the Constable Hook area of the City of Bayonne. The site is located on reclaimed land and is adjacent to Upper New York Bay. The site was formerly owned by Exxon and associated with a former petroleum refinery that was owned and operated by Exxon as far back as 1877. Oily wastes from petroleum refining and organic chemical manufacturing were disposed in the site from 1877 to 1972. There are no known producing waterwells on the Bayonne peninsula.

Signature and Title:

The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".

Name Exxon Bayonne Plt. Mgr. - C.B. Saunders

Street Foot of East 22nd Street

City Bayonne State NJ Zip Code 07002

Signature C.B. Saunders

Date 6/15/81

- ☐ Owner, Present
☒ Owner, Past
☐ Transporter
☐ Operator, Present
☒ Operator, Past
☐ Other

ATTACHMENT A-2

A2

[illegible]

ATTACHMENT A-3

MALCOLM
PIRNIE

March 5

TELEPHONE CALL CONFIRMATION

SITE No. _____

Local 958-6000 Long Distance _____ Date _____

To/From Baton Rouge City Hall Time _____

Project HJ DEP PA

MPI Name _____ Proj. No. 835-03-1

Subject: Baton Rouge Sanitary Landfill

To verify the status of the landfill.

The landfill was closed on June 30, 1983

Route to:

File:

ATTACHMENT B1

MALCOLM
PIRNIE

Attach B.

TELEPHONE CALL CONFIRMATION

SITE No _____

Local ☒ Long Distance _____

Date 3/1/85

To/From Chief Folger, Bayonne Fire Dept.

Time 9.45 a.m.

Project HJDEP PA

MPI Name _____ Proj. No. 835-03-1

Subject: Bayonne Sanitary Landfill.

From the site inspection, Attachment D, the fire incidences are unclear. Chief Folger said that before Edward Sweeney was put in charge of the landfill fires were a regular occurrence. They were due both to the chemicals and to methane gas from the landfill. However when Mr. Sweeney was put in charge of the landfill, the fires ceased. (Mr. Sweeney was a former fireman). As to injuries, it was Chief Folger's opinion that they were common occurrence too because of the fumes as well as the fire.

Route to:

File:

ATTACHMENT B-2

NJPDES Permit
Info.

FACT SHEET

for LANDFILLS to Discharge
Into the Ground Waters of the State

NAME AND ADDRESS OF APPLICANT:

City of Bayonne
630 Avenue "C"
Bayonne, New Jersey 07002

NAME AND ADDRESS OF FACILITY WHERE DISCHARGE OCCURS:

Bayonne Sanitary Landfill
North Hook Road
Lot No. 30; Block No. 231½
Bayonne, New Jersey 07002

RECEIVING WATER:

Ground waters of the State. The discharge is to recent alluvial deposits overlying the Brunswick Formation of Mesozoic Age.

DESCRIPTION OF FACILITY:

The Bayonne City Landfill is located on marsh land and fill adjacent to New York Bay. Bayonne Sanitary Landfill is an existing closed 62 acre landfill that accepted municipal, dry sewage sludge, bulky waste, vegetative waste and animal and food processing wastes.

DESCRIPTION OF NJPDES GROUND WATER MONITORING PERMIT:

The discharge from the landfill is in the form of leachate. Five (5) ground water monitoring wells will be tested on a periodic basis.

PERMIT CONDITIONS:

Issue an Initial NJPDES Permit with the attached general and special conditions.

WQM111-S/GWM: fmm

ATTACHMENT C-1

76

ANNUAL OPERATIONAL STATEMENT FOR A SOLID WASTE FACILITY

0901A

FISCAL YEAR 83

0901A

READ ENCLOSED INSTRUCTIONS CAREFULLY

INFORMATION ON FILE FROM LAST YEAR - CORRECT IN SECTION B

SECTION A

FEID 690220853

0901A

(201) 858-6066

SWEENEY EDWARD M
BAYONNE CITY
630 AVENUE C
BAYONNE

NJ 07002

MUNICIPALITY

SWEENEY EDWARD A

(201) 858-6066

1. Applicants Fed. Employer I.D. or Soc. Sec. No.
2. Facility Registration Number
3. Public Utilities Commission License No.
4. Applicants Telephone No.
5. Applicants Name
6. Company or Trade Name
7. Street Address
8. City, State, Zip Code
9. Type of Organization
10.

Corporate Data

 - a. Registered in
 - b. Date of filing
 - c. Agents Name
 - d. Agents Street Address
 - e. Agents City, State, Zip Code
 - f. Agents Telephone
11.
 - a. Name Person with prime Admin. Authority
 - b. Telephone Number of 11a.

THIS SECTION FOR NEW APPLICANTS OR CORRECTIONS TO SECTION A

SECTION B

1. Applicants Federal Employer I.D. or Social Security No.: ☐ FEID, or ☐ SS No. _____
2. Facility Registration Number (Office Use Only) _____
3. Public Utilities Commission License Number _____
4. Applicants Area Code and Telephone Number _____
5. Applicants Name: Last _____ First _____ Init. _____
6. Company or Trade Name _____
7. Street Address or Box Number _____
8. City _____ State _____ Zip Code _____
9. Type of Organization-Check One: A. ☐ Proprietor, B. ☐ Partnership, C. ☐ Incorporated, D. ☐ Municipality, E. ☐ County, F. ☐ State Government, G. ☐ Authority, H. ☐ Federal Government, X. ☐ Other
10. Corporate or Partnership Data (if any):
 - a. Registered in State of _____, County of _____
 - b. Date of filing _____
 - c. Agents Name: Last _____ First _____ Init. _____
 - d. Agents Street Address or Box Number _____
 - e. Agents City _____ State _____ Zip Code _____
 - f. Agents Area Code and Telephone Number _____
11. Person Having Prime Administrative Authority:
 - a. Name: Last _____ First _____ Init. _____
 - b. Area Code and Telephone Number _____

SECTION C

1. Type of Facility: SANITARY LANDFILL
2. Name of Facility: BAYONNE SANITARY LANDFILL
3. Location (Street) NORTH HOOK ROAD & AVENUE "J"
(Municipality) BAYONNE CITY (County) HUDSON
4. Estimated Remaining Life (Years) 5 (Tons) 200,000
5. Is Property Leased? ☐ Yes, ☒ No. If Yes, Answer (a) and (b)
 - (a) Owner's Name (Last) _____ (First) _____ M.I. _____
 - (b) Owner's Address (Street) _____
(Municipality) _____ (State) _____ (Zip) _____

ATTACHMENT C-2

022161

READ ENCLOSED INSTRUCTIONS CAREFULLY

NEW JERSEY STATE DEPARTMENT OF ENVIRONMENTAL PROTECTION
SOLID WASTE ADMINISTRATION
P.O. BOX 2807, TRENTON, N.J. 08625

RECLAIMED WASTE
REPORT

	NAME OF FACILITY _____ FACILITY REGISTRATION # _____	
S E C T I O N G	WASTE RECLAIMED DURING THE PRECEDING YEAR (January 1 thru December 31)	
	SOLIDS IN TONS	TONS
	50. Ferrous Metals	50. _____
	51. Non-Ferrous Metals	51. _____
	52. Newsprint	52. 401 Tons *
	53. Corrugated	53. _____
	54. Other Paper Products	54. _____
	55. Glass	55. _____
	56. Chemicals - Dry	56. _____
	57. Plastics	57. _____
58. Tires	58. _____	
59. Junked Autos	59. _____	
	Total Reclaimed Solids in Tons	
	LIQUIDS IN GALLONS	GALLONS
	90. Oil	90. _____
	91. Chemical Solvents	91. _____
	92. Other Chemical Liquids	92. _____
	Total Reclaimed Liquids in Gallons	
	* From August, 1981 to December 1981	
S E C T I O N H	I certify that the information contained herein is true to the best of my knowledge.	
	Signature <u>Edward M. Sweeney</u>	Date <u>21 July 1982</u>
	Name typed <u>Edward M. Sweeney</u>	Title <u>Director, Public Works</u>
S E C T I O N I	FOR OFFICE USE ONLY	
	ATTACHMENT <u>C-3</u>	

SECTION D

WASTE DISPOSED REPORT

FACILITY REGISTRATION NUMBER 0901A

WASTE DISPOSED OF DURING THE PRECEDING YEAR (January 1 thru December 31)

SOLIDS IN CUBIC YARDS

- 10. Municipal (Household, Commercial & Institutional)
- 12. Dry Sewage Sludge
- 13. Bulky Waste
- 17. Hazardous Waste - Dry
- 18. Chemical Waste - Dry (Non - Hazardous)
- 23. Vegetative Waste
- 25. Animal and Food Processing Wastes
- 26. Oil Spill Clean-up Wastes
- 27. Industrial (Non-Chemical)

CUBIC YARDS (as delivered)		
COMPACTED	NON-COMPACTED	SUB-TOTAL
10.	118,097	118,097
12.		
13.		
17.		
18.		
23.		
25.		
26.		
27.		
TOTAL SOLIDS		118,097

SEPTAGE IN GALLONS

- 73. Septic Tank Clean-Out Wastes
- 74. Liquid Sewage Sludge

TOTAL

GALLONS

73.	
74.	

LIQUIDS IN GALLONS

- 70. Waste Oil and Sludge
- 72. Bulk Liquid and Semi-Liquids
- 76. Hazardous Waste Liquids
- 77. Chemical Waste Liquids

TOTAL

GALLONS

70.	
72.	
76.	

DID YOU RECLAIM ANY WASTE? NO ___ YES ☒ (If YES, enter on next page)

SECTION E

Having Prime Administrative Authority, I certify that the information contained herein is true to the best of my knowledge.

Signature Edward M. Sweeney Date 21 July 1982

Name typed Edward M. Sweeney Title Director, Public Works

SECTION F

FOR OFFICIAL USE ONLY

- A. Sanitary Landfill
- B. Incinerator
- C. Compost
- D. Chemical Processing & Treatment
- E. Resource Recovery
- F. Transfer Station
- G. Shredder
- H. Baler
- I. Sludge Farm
- J. Disruption
- X. Other

ATTACHMENT C-4

REGISTRATION STATEMENT FOR A SOLID WASTE FACILITY

**A SEPARATE REGISTRATION
IS REQUIRED FOR EACH
SOLID WASTE FACILITY**

INCOMPLETE OR IMPROPERLY PREPARED STATEMENTS WILL BE RETURNED.
— PRINT OR TYPE ONLY —

1. If the above name and address of registrant is incorrect or missing enter corrected information where indicated.
(Use SSN ONLY if you do not have a FEID number)

2 F													Federal Employer ID No.													2 S			6 			8 				Soc. Sec. No.			
13 APPLICANT'S - LAST NAME													31 FIRST NAME													43 I		44 TITLE											
48 CITY OF BAYONNE													COMPANY OR TRADE NAME																										
13 STREET ADDRESS													630 Avenue C																										
38 CITY													51 STATE		54 ZIP CODE					59 AREA			62 TELEPHONE NUMBER			65													
Bayonne													NJ		07002					201			823			1000													

- [illegible]

- 3.
- TYPE ORGANIZATION
- (CHECK ONLY ONE)

13 ☐ SOLE PROPRIETOR 13 ☐ PARTNERSHIP 13 ☐ INCORPORATED 13 ☒ MUNICIPALITY

13 ☐ COUNTY 13 ☐ UNIT OF STATE GOV. 13 ☐ AUTHORITY

13 ☐ OTHER (EXPLAIN)

4. SOLID WASTE FACILITY DATA

14	STREET ADDRESS OF FACILITY	39	MUNICIPALITY (CITY)
	H o o k R o a d		B a y o n n e
52	COUNTY	62	BLOCK NO.
	H u d s o n		2 3 1 1/2
		67	LOT NO.
			3 E 1
			THROUGH
		71	LOT NO.

If property description has additional block and lot information, attach a separate sheet including all block and lot data. ☐ Check this box to indicate

Check this box to indicate additional data. 75
X

- A. LICENSED BY PUC ☒ NO ☐ YES (If yes give PUC Certificate No.)
- B. ESTIMATED REMAINING LIFE OF THIS FACILITY. 7 YEARS AND 5 8 0 0 0 0 TONS
(BASED ON PRESENT USE RATE)
- C. THIS PROPERTY OWNED ☒ OR LEASED ☐ BY APPLICANT ATTACHMENT C-5

ATTACHMENT C-5

6. PROPERTY TITLE DATA

A. CERTIFIED COPY OF TAX MAP SHOWING BLOCK & LOT NOS.

ATTACHED ☐ PREVIOUSLY SUBMITTED ☒ DATE SUBMITTED 3 1 2 7 2

B. OWNERS - LAST NAME FIRST NAME
CITY OF BAYONNE

STREET ADDRESS
630 Avenue C

CITY STATE ZIP CODE
Bayonne N.J. 07702

C. IF LEASED - 1. LEASE ENCLOSED ☐ 2. PREVIOUSLY SUBMITTED ☐ DATE 60 MO DAY YR.

7. ENGINEERING DESIGN PREPARED BY LICENSED PROFESSIONAL ENGINEER (6 COPIES)

ATTACHED ☐ UPDATED DESIGN ☐ PREV. SUBMITTED ☒ DATE 67 MO DAY YR.

8. A. PARTNERS OR OFFICERS OF CORPORATION, GOVERNMENTAL BODY OR PUBLIC AUTHORITIES.

13	LAST NAME	31	FIRST NAME	43 I	44	TITLE

B. CORPORATION DATA

REGISTERED IN - 13 STATE 15 COUNTY DATE REG. 25 MO DAY YR.

AGENT - LAST NAME 31 FIRST NAME 49

AGENT - STREET ADDRESS 13

AGENT - CITY 38 STATE 51 ZIP CODE 54 AREA 59 NUMBER 62 65

9. NATURE OF OPERATION (CHECK ALL APPLICABLE ITEMS)

- | | |
|--|---|
| <input checked="" type="checkbox"/> 13 SANITARY LANDFILL | <input type="checkbox"/> 14 INCINERATOR |
| <input type="checkbox"/> 15 COMPOSTING FACILITY | <input type="checkbox"/> 16 CHEMICAL PROCESSING & TREATMENT |
| <input type="checkbox"/> 17 RESOURCE RECOVERY | <input type="checkbox"/> 18 TRANSFER STATION |
| <input type="checkbox"/> 19 OTHER (EXPLAIN) | |

6 ATTACHMENT C-6

3 1 DAY YR
2 1 2 7 2

OR SSN HERE

--	--	--	--	--	--	--	--	--	--

MATERIAL FOR DISPOSAL:

REQUESTED:

(a) SOLIDS:

- 20 ☒ MUNICIPAL (HOUSEHOLD, COMMERCIAL, INSTITUTIONAL).....
- 22 ☒ DRY SEWAGE SLUDGE.....
- 24 ☒ BULKY WASTES.....
- 26 ☒ CONSTRUCTION AND DEMOLITION.....
- 28 ☐ PESTICIDES - DRY.....
- 30 ☐ PESTICIDE CONTAINERS.....
- 32 ☐ HAZARDOUS WASTES - DRY.....
- 34 ☐ CHEMICAL WASTES - DRY.....
- 36 ☐ JUNKED AUTOS.....
- 38 ☐ TIRES.....
- 40 ☒ DEAD ANIMALS.....
- 42 ☐ LEAVES AND CHOPPED TREE WASTES.....
- 44 ☐ AGRICULTURE AND FOOD PROCESSING WASTES.....
- 46 ☐ TREE STUMPS.....
- 48 ☐ OIL SPILL CLEAN-UP WASTES.....

(b) LIQUIDS:

- 50 ☐ WASTE OIL.....
- 52 ☐ BULK LIQUIDS AND SEMI-LIQUIDS.....
- 54 ☐ SEWAGE: SEPTIC OR OTHER FECAL LIQUIDS.....
- 56 ☐ PESTICIDE LIQUIDS.....
- 58 ☐ HAZARDOUS WASTE LIQUIDS.....
- 60 ☐ CHEMICAL WASTE LIQUIDS.....

FOR OFFICE USE ONLY

APPROVED

21	
23	
25	
27	
29	
31	
33	
35	
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39	
41	
43	
45	
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49	
51	
53	
55	
57	
59	
61	

11. OPERATIONAL DATA

A. INDICATE ACTUAL INCLUSIVE DATES USED IN REPORTING THIS DATA.

PERIOD FROM 13 MO. DAY YR.
1 0 1 7 3

(12 MONTHS) PERIOD TO

19 MO. DAY YR.
1 0 1 7 4

B. Enter total Tonnage or Gallons of Solid and Liquid wastes received at your facility for the Past 12 MONTHS for each category listed:

(1) SOLID WASTES

- a. MUNICIPAL (HOUSEHOLD, COMMERCIAL, INDUSTRIAL)..... 25
- b. DRY SEWAGE SLUDGE..... 33
- c. BULKY WASTES..... 41
- d. CONSTRUCTION & DEMOLITION..... 49
- e. PESTICIDES - 1. DRY..... 57
- f. 2. CONTAINERS..... 65
- g. HAZARDOUS WASTE - DRY..... 13
- h. CHEMICAL WASTE - DRY..... 21
- i. JUNKED AUTOS..... 29
- j. TIRES..... 37
- k. DEAD ANIMALS..... not known but negligible..... 45
- l. LEAVES AND CHOPPED TREE WASTES..... 53
- m. AGRICULTURE AND FOOD PROCESSING WASTE..... 61
- n. TREE STUMPS..... 69
- o. OIL SPILL CLEAN-UP WASTE..... 13

TOTAL TONNAGE

25	6	9	7	0	0
33		7	0	0	0
41					
49	6		0	0	0
57					
65					
13					
21					
29					
37					
45					
53					
61					
69					
13					
(12 MONTHS) TOTAL SOLID WASTES RECEIVED	8	2	7	0	0

ATTACHMENT C-7

11. OPERATIONAL DATA (CONTINUED FROM PAGE - 3)

(2) LIQUID WASTES

		TOTAL GALLONS				
a. WASTE OIL.....	31					a.
b. BULK LIQUID WASTES.....	42					b.
c. SEWAGE: SEPTIC OR OTHER FECAL.....	53					c.
d. PESTICIDE LIQUIDS.....	64					d.
e. HAZARDOUS LIQUIDS.....	13					e.
f. CHEMICAL LIQUIDS.....	24					f.
(12 MONTHS) TOTAL LIQUIDS RECEIVED	35					

C. Enter total Tonnage or Gallons of Solid or Liquid Wastes recovered at your facility during the past 12 months for each category listed:

(1) RECYCLED SOLID WASTES

		TOTAL TONNAGE				
a. FERROUS METALS.....	13					a.
b. NON-FERROUS METALS.....	21					b.
c. NEWSPRINT.....	29					c.
d. CORRUGATED.....	37					d.
e. OTHER PAPER PRODUCTS.....	45					e.
f. GLASS.....	53					f.
g. CHEMICALS - DRY.....	61					g.
h. PLASTICS.....	69					h.
i. TIRES.....	13					i.
j. JUNKED AUTOS.....	21					j.
TOTAL RECYCLED SOLIDS						

(2) RECYCLED LIQUIDS

		TOTAL GALLONS				
a. OIL.....	29					a.
b. CHEMICAL SOLVENTS.....	40					b.
c. OTHER CHEMICAL LIQUIDS.....	51					c.
TOTAL RECYCLED LIQUIDS						

12. FEE SCHEDULE

(Refer to N.J.A.C. 7:26-4 FOR FEE SCHEDULE)

All fees must be submitted with this statement by CERTIFIED CHECK or MONEY ORDER - Payable to "TREASURER, STATE OF NEW JERSEY."

Check or Money Order No. ¹³ 1 6 AMOUNT ²³ DOLLARS , 5 0 0 . CENTS 0 0

I CERTIFY THAT THE INFORMATION SUBMITTED ON THIS FORM AND ANY ATTACHMENTS APPENDED ARE TRUE TO THE BEST OF MY KNOWLEDGE. MY ID NUMBER AND SIGNATURE ARE ON ALL ATTACHMENTS.


SIGNATURE

Acting
City
Engineer
TITLE

²⁹ MO. DAY YR.
1 15 7 5
DATE

CERT. DATE:
ENG. DES. APPR.:

FOR OFFICIAL USE ONLY

ATTACHMENT C-8

SIGNATURE

MEMO

NEW JERSEY STATE DEPARTMENT OF ENVIRONMENTAL PROTECTION

TO _____
 FROM N. S. DATE 3/10, 11, 1982
 SUBJECT Bayonne ID # 0901 A

Sketch is not to scale
 North given is approximate

Water

Face vertical but mostly covered

weed covered area with
 brick, cement pieces, wood
 and some metals protruding

Top mostly earth
 covered with brick
 cement pieces and
 some metals protruding.

Slope mostly covered
 with brick, cement pieces
 wood and some metals
 protruding

Water

Top mostly earth
 covered in this
 area

Mostly earth covered
 on this slope

Mostly earth covered
 Area on this
 slope

Open refuse on face
 mostly covered
 level areas protruding
 wood, papers, plastics
 and metals

Roadway

earth covered

paper and metals

partly covered

exposed cement pieces, brick, wood
 1 meter

ATTACHMENT

C-9

M E M O R A N D U M

State of New Jersey
Department of Environmental Protection

TO: File

INVESTIGATIVE
REPORT

FROM: _____

DATE: _____

SUBJECT: IN-0901AViolations

7:26-2.5.13 On both days of my visit the entire site had protruding materials.

7:26-2.7.1 IT appears to me that the trench used to receive daily waste has been dug out of an old landfill deposit. I received no notice that permission was given to disrupt the previously deposited materials.

Attachment D

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POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT

REGION II SITE NUMBER (to be assigned by HQ) NJ000002840

GENERAL INSTRUCTIONS: Complete Sections I and III through XV of this form as completely as possible. Then use the information on this form to develop a Tentative Disposition (Section II). File this form in its entirety in the regional Hazardous Waste Log File. Be sure to include all appropriate Supplemental Reports in the file. Submit a copy of the forms to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME <u>Bayonne City LF.</u>		B. STREET (or other identifier) <u>Lower Hook Rd</u>	
C. CITY <u>Bayonne</u>	D. STATE <u>NJ</u>	E. ZIP CODE	F. COUNTY NAME <u>Hudson</u>
G. SITE OPERATOR INFORMATION		2. TELEPHONE NUMBER	
1. NAME <u>Bayonne</u>			
3. STREET	4. CITY	5. STATE	6. ZIP CODE
H. REALTY OWNER INFORMATION (if different from operator of site)		2. TELEPHONE NUMBER	
1. NAME <u>Bayonne</u>			
3. CITY	4. STATE	5. ZIP CODE	
I. SITE DESCRIPTION <u>5 drums dumped at landfill</u>			
J. TYPE OF OWNERSHIP			
<input type="checkbox"/> 1. FEDERAL <input checked="" type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY <input checked="" type="checkbox"/> 4. MUNICIPAL <input type="checkbox"/> 5. PRIVATE			

II. TENTATIVE DISPOSITION (complete this section last)

A. ESTIMATE DATE OF TENTATIVE DISPOSITION (mo., day, & yr.)	B. APPARENT SERIOUSNESS OF PROBLEM		
	<input checked="" type="checkbox"/> 1. HIGH <input type="checkbox"/> 2. MEDIUM <input type="checkbox"/> 3. LOW <input type="checkbox"/> 4. NONE		
C. PREPARER INFORMATION			
1. NAME <u>John R. Gemeniz</u>	2. TELEPHONE NUMBER <u>(212) 264-1573</u>	3. DATE (mo., day, & yr.) <u>10/30/80</u>	

III. INSPECTION INFORMATION

A. PRINCIPAL INSPECTOR INFORMATION		2. TITLE <u>Environmental Scientist</u>	
1. NAME <u>George Weiss</u>		4. TELEPHONE NO. (area code & no.)	
3. ORGANIZATION <u>NJ DEP</u>			

B. INSPECTION PARTICIPANTS		
1. NAME	2. ORGANIZATION	3. TELEPHONE NO.
<u>Tom Rodger</u>	<u>OH Materials</u>	
<u>Don Sweeney</u>	<u>Bayonne Health Dept.</u>	

C. SITE REPRESENTATIVES INTERVIEWED (corporate officials, workers, residents)		
1. NAME	2. TITLE & TELEPHONE NO.	3. ADDRESS

ATTACHMENT

D-1

III. INSPECTION INFORMATION (continued)

D. GENERATOR INFORMATION (sources of waste)

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE GENERATED
Sampson Tank		101 East 21st, Bayonne	Kyrene

E. TRANSPORTER/HAULER INFORMATION

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE TRANSPORTED

F. IF WASTE IS PROCESSED ON SITE AND ALSO SHIPPED TO OTHER SITES, IDENTIFY OFF-SITE FACILITIES USED FOR DISPOSAL.

1. NAME	2. TELEPHONE NO.	3. ADDRESS

G. DATE OF INSPECTION
(mo., day, yr.)

H. TIME OF INSPECTION

I. ACCESS GAINED BY: (credentials must be shown in all cases)

8/11/80

9:45 am



1. PERMISSION



2. WARRANT

J. WEATHER (describe)

IV. SAMPLING INFORMATION

A. Mark 'X' for the types of samples taken and indicate where they have been sent e.g., regional lab, other EPA lab, contractor, etc. and estimate when the results will be available.

1. SAMPLE TYPE	2. SAMPLE TAKEN (mark 'X')	3. SAMPLE SENT TO:	4. DATE RESULTS AVAILABLE
a. GROUNDWATER			
b. SURFACE WATER			
c. WASTE	X	Stablex - Reutter	8/15/80
d. AIR			
e. RUNOFF			
f. SPILL			
g. SOIL			
h. VEGETATION			
i. OTHER (specify)			

B. FIELD MEASUREMENTS TAKEN (e.g., radioactivity, explosivity, PH, etc.)

1. TYPE	2. LOCATION OF MEASUREMENTS	3. RESULTS

ATTACHMENT

D-2

Continued From Page 2

IV. SAMPLING INFORMATION (continued)

C. PHOTOS
1. TYPE OF PHOTOS
☐ a. GROUND ☐ b. AERIAL
2. PHOTOS IN CUSTODY OF: None

D. SITE MAPPED?
☐ YES. SPECIFY LOCATION OF MAPS: No

E. COORDINATES
1. LATITUDE (deg.-min.-sec.)
2. LONGITUDE (deg.-min.-sec.)

V. SITE INFORMATION

A. SITE STATUS
☒ 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)
☐ 2. INACTIVE (Those sites which no longer receive wastes.)
☐ 3. OTHER (specify): _____
(Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

B. IS GENERATOR ON SITE?
☒ 1. NO ☐ 2. YES (specify generator's four-digit SIC Code): _____

C. AREA OF SITE (in acres) 20
D. ARE THERE BUILDINGS ON THE SITE?
☒ 1. NO ☐ 2. YES (specify): _____

VI. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

X	A. TRANSPORTER	X	B. STORER	X	C. TREATER	X	D. DISPOSER
	1. RAIL		1. PILE		1. FILTRATION	<input checked="" type="checkbox"/>	1. LANDFILL
	2. SHIP		2. SURFACE IMPOUNDMENT		2. INCINERATION		2. LANDFARM
	3. BARGE		3. DRUMS		3. VOLUME REDUCTION		3. OPEN DUMP
	4. TRUCK		4. TANK, ABOVE GROUND		4. RECYCLING/RECOVERY		4. SURFACE IMPOUNDMENT
	5. PIPELINE		5. TANK, BELOW GROUND		5. CHEM./PHYS./TREATMENT		5. MIDNIGHT DUMPING
	6. OTHER (specify):		6. OTHER (specify):		6. BIOLOGICAL TREATMENT		6. INCINERATION
					7. WASTE OIL REPROCESSING		7. UNDERGROUND INJECTION
					8. SOLVENT RECOVERY		8. OTHER (specify):
					9. OTHER (specify):		

E. SUPPLEMENTAL REPORTS: If the site falls within any of the categories listed below, Supplemental Reports must be completed. Indicate which Supplemental Reports you have filled out and attached to this for..

☐ 1. STORAGE ☐ 2. INCINERATION ☐ 3. LANDFILL ☐ 4. SURFACE IMPOUNDMENT ☐ 5. DEEP WELL
☐ 6. CHEM/BIO/PHYS TREATMENT ☐ 7. LANDFARM ☐ 8. OPEN DUMP ☐ 9. TRANSPORTER ☐ 10. RECYCLOR/RECLAIMER

VII. WASTE RELATED INFORMATION

A. WASTE TYPE
☐ 1. LIQUID ☐ 2. SOLID ☐ 3. SLUDGE ☐ 4. GAS

B. WASTE CHARACTERISTICS
☐ 1. CORROSIVE ☐ 2. IGNITABLE ☐ 3. RADIOACTIVE ☐ 4. HIGHLY VOLATILE
☐ 5. TOXIC ☐ 6. REACTIVE ☐ 7. INERT ☐ 8. FLAMMABLE
☐ 9. OTHER (specify):

WASTE CATEGORIES
1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

ATTACHMENT D-3

Continue
B. NON

WASTE RELATED INFORMATION (continued)

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE		b. OIL		c. SOLVENTS		d. CHEMICALS		e. SOLIDS		f. OTHER	
AMOUNT	UNIT OF MEASURE	AMOUNT	UNIT OF MEASURE	AMOUNT	UNIT OF MEASURE	AMOUNT	UNIT OF MEASURE	AMOUNT	UNIT OF MEASURE	AMOUNT	UNIT OF MEASURE
(1) PAINT, PIGMENTS		(1) OILY WASTES		(1) HALOGENATED SOLVENTS		(1) ACIDS		(1) FLYASH		(1) LABORATORY, PHARMACEUT.	
(2) METALS SLUDGES		(2) OTHER(specify):		(2) NON-HALOGNTD. SOLVENTS		(2) PICKLING LIQUORS		(2) ASBESTOS		(2) HOSPITAL	
(3) POTW				(3) OTHER(specify):		(3) CAUSTICS		(3) MILLING/MINE TAILINGS		(3) RADIOACTIVE	
(4) ALUMINUM SLUDGE						(4) PESTICIDES		(4) FERROUS SMELTING WASTES		(4) MUNICIPAL	
(5) OTHER(specify):						(5) DYES/INKS		(5) NON-FERROUS SMLTG. WASTES		(5) OTHER(specify):	
						(6) CYANIDE		(6) OTHER(specify):			
						(7) PHENOLS					
						(8) HALOGENS					
						(9) PCB					
						(10) METALS					
						(11) OTHER(specify):					

D. LIST SUBSTANCES OF GREATEST CONCERN WHICH ARE ON THE SITE (place in descending order of hazard)

1. SUBSTANCE	2. FORM (mark 'X')			3. TOXICITY (mark 'X')				4. CAS NUMBER	5. AMOUNT	6. UNIT
	a. SOLID	b. LIQ.	c. VAPOR	a. HIGH	b. MED.	c. LOW	d. NONE			
Xylene										
Ethyl Benzene										

VII. HAZARD DESCRIPTION

FIELD EVALUATION HAZARD DESCRIPTION: Place an 'X' in the box to indicate that the listed hazard exists. Describe the hazard in the space provided.

☐ A. HUMAN HEALTH HAZARDS

ATTACHMENT D-4

VIII. HAZARD DESCRIPTION (continued)

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☐ B. NON-WORKER INJURY/EXPOSURE☐ C. WORKER INJURY/EXPOSURE☐ D. CONTAMINATION OF WATER SUPPLY☐ E. CONTAMINATION OF FOOD CHAIN☐ F. CONTAMINATION OF GROUND WATER☐ G. CONTAMINATION OF SURFACE WATER

ATTACHMENT

D-5

VIII. HAZARD DESCRIPTION (continued)

☒ T. MIDNIGHT DUMPING ... 5 drums dumped in municipal landfill.

☐ U. OTHER (specify):

IX. POPULATION DIRECTLY AFFECTED BY SITE

A. LOCATION OF POPULATION	B. APPROX. NO. OF PEOPLE AFFECTED	C. APPROX. NO. OF PEOPLE AFFECTED WITHIN UNIT AREA	D. APPROX. NO. OF BUILDINGS AFFECTED	E. DISTANCE TO SITE (specify units)
1. IN RESIDENTIAL AREAS	0			
2. IN COMMERCIAL OR INDUSTRIAL AREAS	0			
3. IN PUBLICLY TRAVELLED AREAS	0			
4. PUBLIC USE AREAS (parks, schools, etc.)	6			

X. WATER AND HYDROLOGICAL DATA

A. DEPTH TO GROUNDWATER (specify unit) 15 ft	B. DIRECTION OF FLOW Underground	C. GROUNDWATER USE IN VICINITY None
D. POTENTIAL YIELD OF AQUIFER	E. DISTANCE TO DRINKING WATER SUPPLY (specify unit of measure)	F. DIRECTION TO DRINKING WATER SUPPLY

G. TYPE OF DRINKING WATER SUPPLY

- ☐ 1. NON-COMMUNITY < 15 CONNECTIONS*
☒ 2. COMMUNITY (specify town): Bayonne > 15 CONNECTIONS
☐ 3. SURFACE WATER
☐ 4. WELL

Continued From Page 8

X. WATER AND HYDROLOGICAL DATA (continued)

H. LIST ALL DRINKING WATER WELLS WITHIN A 1/4 MILE RADIUS OF SITE

1. WELL	2. DEPTH (specify unit)	3. LOCATION (proximity to population/buildings)	4. NON-COM- MUNITY (mark 'X')	5. COMMUN- ITY (mark 'X')
<i>None</i>				

I. RECEIVING WATER

1. NAME

Hockersack River



2. SEWERS



3. STREAMS/RIVERS



4. LAKES/RESERVOIRS



5. OTHER (specify):

6. SPECIFY USE AND CLASSIFICATION OF RECEIVING WATERS

XI. SOIL AND VEGETATION DATA

LOCATION OF SITE IS IN:

None



A. KNOWN FAULT ZONE



B. KARST ZONE



C. 100 YEAR FLOOD PLAIN



D. WETLAND



E. A REGULATED FLOODWAY



F. CRITICAL HABITAT



G. RECHARGE ZONE OR SOLE SOURCE AQUIFER

XII. TYPE OF GEOLOGICAL MATERIAL OBSERVED

Mark 'X' to indicate the type(s) of geological material observed and specify where necessary, the component parts.

'X'	A. COVER BURDEN	'X'	B. BEDROCK (specify below)	'X'	C. OTHER (specify below)
	1. SAND			<input checked="" type="checkbox"/>	<i>fill & refuse</i>
	2. CLAY				
	3. GRAVEL				

XIII. SOIL PERMEABILITY



A. UNKNOWN



B. VERY HIGH (100,000 to 1000 cm/sec.)



C. HIGH (1000 to 10 cm/sec.)



D. MODERATE (10 to .1 cm/sec.)



E. LOW (.1 to .001 cm/sec.)



F. VERY LOW (.001 to .00001 cm/sec.)

G. RECHARGE AREA



1. YES



2. NO

3. COMMENTS:

Area capped

H. DISCHARGE AREA



1. YES



2. NO

3. COMMENTS:

I. SLOPE

1. ESTIMATE % OF SLOPE

Unknown

2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.

Unknown

J. OTHER GEOLOGICAL DATA

ATTACHMENT D-7

Continued From Front

XIV. PERMIT INFORMATION

List all applicable permits held by the site and provide the related information.

A. PERMIT TYPE (e.g., RCRA, State, NPDES, etc.)	B. ISSUING AGENCY	C. PERMIT NUMBER	D. DATE ISSUED (mo., day, & yr.)	E. EXPIRATION DATE (mo., day, & yr.)	F. IN COMPLIANCE (mark 'X')		
					1. YES	2. NO	3. UN- KNOWN
Municipal Solid Waste permit	NJDEP						✓

XV. PAST REGULATORY OR ENFORCEMENT ACTIONS

☒ NONE ☐ YES (summarize in this space)

NOTE: Based on the information in Sections III through XV, fill out the Tentative Disposition (Section II) information on the first page of this form.

ATTACHMENT D-8



POTENTIAL HAZARDOUS WASTE SITE
IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION 11 SITE NUMBER (to be assigned by HQ) NJ 00000 2890

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (Preliminary Assessment). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME <u>Bayonne City Landfill</u>		B. STREET (or other identifier) <u>Lower Hook Road</u>	
C. CITY <u>Bayonne</u>	D. STATE <u>NJ</u>	E. ZIP CODE	F. COUNTY NAME <u>Hudson</u>
G. OWNER/OPERATOR (if known) 1. NAME <u>City of Bayonne</u>		2. TELEPHONE NUMBER	
H. TYPE OF OWNERSHIP <input type="checkbox"/> 1. FEDERAL <input type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY <input checked="" type="checkbox"/> 4. MUNICIPAL <input type="checkbox"/> 5. PRIVATE <input type="checkbox"/> 6. UNKNOWN			

I. SITE DESCRIPTION Landfill used to dispose of drums of chemicals

J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.) <u>Public City Fire Dept.</u>	K. DATE IDENTIFIED (mo., day, & yr.) <u>8/7/80</u>
---	---

L. PRINCIPAL STATE CONTACT 1. NAME <u>Tony Farrow</u>	2. TELEPHONE NUMBER <u>(809) 292-1943</u>
---	--

II. PRELIMINARY ASSESSMENT (complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM
☒ 1. HIGH ☐ 2. MEDIUM ☐ 3. LOW ☐ 4. NONE ☐ 5. UNKNOWN

B. RECOMMENDATION
☐ 1. NO ACTION NEEDED (no hazard)
☒ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR: 8/7/80
b. WILL BE PERFORMED BY: State
☐ 3. SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:
b. WILL BE PERFORMED BY:
☐ 4. SITE INSPECTION NEEDED (low priority)

C. PREPARER INFORMATION 1. NAME <u>John R. Gennery</u>	2. TELEPHONE NUMBER <u>(212) 264-1573</u>	3. DATE (mo., day, & yr.) <u>10/7/80</u>
--	--	---

III. SITE INFORMATION

A. SITE STATUS <input checked="" type="checkbox"/> 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)	<input type="checkbox"/> 2. INACTIVE (Those sites which no longer receive wastes.)	<input type="checkbox"/> 3. OTHER (specify): (Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)
---	--	---

B. IS GENERATOR ON SITE?
☒ 1. NO ☐ 2. YES (specify generator's four-digit SIC Code):

C. AREA OF SITE (in acres) <u>2.20</u>	D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES 1. LATITUDE (deg.-min.-sec.) <u>40° 38' 50"</u> 2. LONGITUDE (deg.-min.-sec.) <u>74° 08' 10"</u>
---	--

E. ARE THERE BUILDINGS ON THE SITE?
☒ 1. NO ☐ 2. YES (specify):

IV. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

X	A. TRANSPORTER	X	B. STORER	X	C. TREATER	X	D. DISPOSER
	1. RAIL		1. PILE		1. FILTRATION	X	1. LANDFILL
	2. SHIP		2. SURFACE IMPOUNDMENT		2. INCINERATION		2. LANDFARM
	3. BARGE		3. DRUMS		3. VOLUME REDUCTION		3. OPEN DUMP
	4. TRUCK		4. TANK, ABOVE GROUND		4. RECYCLING/RECOVERY		4. SURFACE IMPOUNDMENT
	5. PIPELINE		5. TANK, BELOW GROUND		5. CHEM./PHYS. TREATMENT		5. MIDNIGHT DUMPING
	6. OTHER (specify):		6. OTHER (specify):		6. BIOLOGICAL TREATMENT		6. INCINERATION
					7. WASTE OIL REPROCESSING		7. UNDERGROUND INJECTION
					8. SOLVENT RECOVERY		8. OTHER (specify):
					9. OTHER (specify):		

E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

2 city employees caught dumping drums at municipal landfill.

V. WASTE RELATED INFORMATION

A. WASTE TYPE

☐ 1. UNKNOWN ☒ 2. LIQUID ☐ 3. SOLID ☐ 4. SLUDGE ☐ 5. GAS

B. WASTE CHARACTERISTICS

☐ 1. UNKNOWN ☐ 2. CORROSIVE ☐ 3. IGNITABLE ☐ 4. RADIOACTIVE ☐ 5. HIGHLY VOLATILE
☒ 6. TOXIC ☐ 7. REACTIVE ☐ 8. INERT ☐ 9. FLAMMABLE

☐ 10. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

NO

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT	AMOUNT	AMOUNT <i>5</i>	AMOUNT	AMOUNT	AMOUNT
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE <i>drums</i>	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
X (1) PAINT, PIGMENTS	X (1) OILY WASTES	X (1) HALOGENATED SOLVENTS	X (1) ACIDS	X (1) FLYASH	X (1) LABORATORY PHARMACEUT.
(2) METALS SLUDGES	(2) OTHER (specify):	(2) NON-HALOGENATED SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER (specify):	(3) CAUSTICS	(3) MILLING/ MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMLTG. WASTES	(4) MUNICIPAL
(5) OTHER (specify):			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER (specify):
			(6) CYANIDE	(6) OTHER (specify):	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			(10) METALS		
			(11) OTHER (specify):		

ATTACHMENT D-10

V. WASTE RELATED INFORMATION (continued)

1. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

Xylenes
Ethyl Benzene
Chromium

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

Leaking arrested at site

VI. HAZARD DESCRIPTION

A. TYPE OF HAZARD	B. POTENTIAL HAZARD (mark 'X')	C. ALLEGED INCIDENT (mark 'X')	D. DATE OF INCIDENT (mo., day, yr.)	E. REMARKS
1. NO HAZARD				
2. HUMAN HEALTH				
3. NON-WORKER INJURY/EXPOSURE				
4. WORKER INJURY	X			
5. CONTAMINATION OF WATER SUPPLY				
6. CONTAMINATION OF FOOD CHAIN				
7. CONTAMINATION OF GROUND WATER				
8. CONTAMINATION OF SURFACE WATER				
9. DAMAGE TO FLORA/FAUNA				
10. FISH KILL				
11. CONTAMINATION OF AIR				
12. NOTICEABLE ODORS				
13. CONTAMINATION OF SOIL				
14. PROPERTY DAMAGE				
15. FIRE OR EXPLOSION				
16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS	X			2 drums crushed during dumping
17. SEWER, STORM DRAIN PROBLEMS				
18. EROSION PROBLEMS				
19. INADEQUATE SECURITY				
20. INCOMPATIBLE WASTES				
21. MIDNIGHT DUMPING	X			
22. OTHER (specify):				

ATTACHMENT

D-11

VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

- ☐ 1. NPDES PERMIT ☐ 2. SPCC PLAN ☒ 3. STATE PERMIT (specify): Landfill
☐ 4. AIR PERMITS ☐ 5. LOCAL PERMIT ☐ 6. RCRA TRANSPORTER
☐ 7. RCRA STORER ☐ 8. RCRA TREATER ☐ 9. RCRA DISPOSER
☐ 10. OTHER (specify): _____

B. IN COMPLIANCE?

- ☐ 1. YES ☐ 2. NO ☒ 3. UNKNOWN

4. WITH RESPECT TO (list regulation name & number): _____

VIII. PAST REGULATORY ACTIONS

- ☒ A. NONE ☐ B. YES (summarize below)

IX. INSPECTION ACTIVITY (past or on-going)

- ☐ A. NONE ☒ B. YES (complete items 1, 2, 3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION
Sampling	8/7/80	State	

X. REMEDIAL ACTIVITY (past or on-going)

- ☐ A. NONE ☒ B. YES (complete items 1, 2, 3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION
Cleanups	8/12/80	State	5 drums removed for proper disposal

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.

Attachment E

Form SWM-928

MEMORANDUM

State of New Jersey
Department of Environmental Protection

TO: File

INVESTIGATIVE
REPORT

FROM: N.B.

DATE: 3/10, 11, 182

SUBJECT:

Bayonne ID# 0901 A

Violations

7:26-2.5. d Waste material is in contact with
the surface waters of this State.

See attached sketch.

7:26-2.5.M. I visited this site twice, twenty
four hours apart. On each visit I found
most of the site lacked daily cover.

ATTACHMENT E-1

Keegan Technology & Testing Associates, Inc.

INSPECTION ENGINEERS AND CHEMISTS

119-123 Paris Street • Newark, N. J. 07105 • (201) 589-1270

Attachment F

CLIENT: City of Bayonne

DATE: 3-21-83

PROJECT: Sampling and Analysis of Well and Bay Water -
Bayonne Sanitary Land Fill

REPORT #: 1

REPORTED TO: City of Bayonne - Attn: Al Sambade - Engr. Dept.

Sample Submitted: Friday, February 25, 1983.

Results are in mg/l unless noted.

@ Bayonne Landfill 2-2-83.

<u>Well Waters</u>	@ <u>Well #1</u>	@ <u>Well #2</u>	@ <u>Well #3</u>	@ <u>Well #4</u>	@ <u>Well #5</u>
Lead	0.16	0.12	0.16	<0.02	0.13
Cadmium	0.007	<0.005	<0.005	<0.005	0.007
pH - standard units	6.74	7.14	7.62	7.29	7.15
Total Organic Carbons	94.	75.	1892.	244.	177.
Chemical Oxygen Demand	chloride interference	chloride interference	chloride interference	chloride interference	chloride interference
Total Dissolved Solids	1340.	19700.	8490.	5950.	3060.
Mercury	<0.0005	<0.0005	<0.0005	0.0014	0.0009
Total Coliform per 100ml	*10	*<1	*<1	*20	*30
Cyanide	0.073	0.063	0.064	0.061	0.006
N	50.0	23.3	370.	92.0	100.
Biochemical Oxygen Demand	55.	<50.	<50.	<50.	67.

ATTACHMENT F1



STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION

CN 402
Trenton, N. J. 08625

PERMIT *



76

The New Jersey Department of Environmental Protection grants this permit in accordance with your application, attachments accompanying same application, and applicable laws and regulations. This permit is also subject to the further conditions and stipulations enumerated in the supporting documents which are agreed to by the permittee upon acceptance of the permit.

Permit No. NJ 0050784	Issuance Date	Effective Date	Expiration Date
Name and Address of Applicant City of Bayonne 630 Avenue "C" Bayonne, N.J. 07002	Location of Activity/Facility Bayonne Sanitary Landfill North Hook Road Lot No. 30, Block No. 231½ Bayonne, N.J. 07002	Name and Address of Owner SAME AS APPLICANT	
Issuing Division <input checked="" type="checkbox"/> Water Resources <input type="checkbox"/> Coastal Resources <input type="checkbox"/> Environmental Quality <input type="checkbox"/> Other	Type of Permit NJPDES Permit for Discharge to Ground Water	Statute(s) N.J.S.A. 58:10A-1 et seq. N.J.S.A. 7:14A-1 et seq.	Application No. NA

This permit requires the City of Bayonne to monitor the ground water at a sanitary landfill in Bayonne, N.J. by operating and maintaining 5 ground water monitoring wells according to the specific and general conditions of this initial interim NJPDES permit. The initial interim NJPDES permit is intended to establish an adequate ground water monitoring program at the above named facility. This permit is only intended to obtain ground water data to evaluate the current status and impact of this facility on ground water. It shall not be construed, nor is it intended to be an approval of any activity that the permittee has conducted which adversely effects the environment, ground or surface water quality, or threatens the public health, safety, or welfare.

The issuance of this initial interim permit does not indicate that the Department has made a determination of the technical adequacy of the information available. Interim initial permits shall not be construed as, nor are they intended to be, long-term approvals; these permits are of limited duration.

The data generated through the initial interim NJPDES permit will be used by the Department to evaluate the current status and impact of existing facilities on ground water quality. It will also give the Department information to determine if there is any potential or actual threat to public health or safety or damage to the environment due to current or past practices. Based on the information generated by the issuance of this permit, the Department may require the permittee to reduce the quantity of discharge, upgrade or install additional treatment, install additional monitoring wells, conduct ground water decontamination procedures or cease discharges to waters of the state.

The issuance of this initial interim NJPDES permit does not bind the Department to renew this permit, nor does it relieve the permittee of the duty to submit additional information as specified in Chapters 6 and 10 of the NJPDES regulations at the time of application renewal or as may be required by the Department prior to permit renewal. Additionally, this initial interim NJPDES permit does not relieve the permittee of any liabilities associated with public health or safety problems or environmental damage created as a result of the permittee's activities.

Documents affixed attached hereto shall become part of this permit.

Approved by the Department of Environmental Protection

Attachment G-1

ARNOLD SCHIFFMAN, ADMINISTRATOR
WATER QUALITY MANAGEMENT

DATE

MALCOLM
PIRNIE

OFF - SITE RECONNAISSANCE

Date: 2/27/85Time In 3:00 PM Out 3:30 PMSite ID No. 76Site Name: Bayonne Municipal LFLocation: BAYONNEAddress: NORTH HOOK ROAD & AVE 'J'City, County: BAYONNEZip: NJ 07002Personnel: JOE ZOLLOYASMIN ALIBHAITitle: ENVIRON. ENGENVIRON ENGConditions: Cloudy + WindyTemperature: ~40°FAny evidence of imminent hazard? NoIllegal Dumping? NoUncapped Monitoring Wells? No

If Yes, Notify NJDEP

Signature: [Signature]Date: 2/27/85Witness: Yasmin AlibhaiDate: 27th February 85

Site: Bayonne Municipal Landfill

Site ID No. 76

Date: 2/27/85

- Ditch containing water crossing North Hawk Rd towards LF
- Covers large area
- High cattle mounds behind industries on N. Hawk Rd.
- Materials appeared to be adequately covered
- Much debris on side of road

Signature:

Witness:

Date:

Date:

2/27/85
at 11 Feb 85

Subject: Bayonne Municipal Landfill Site ID No. 76
Date: 2/27/85 Page No. _____
ASA: 100
Frame No: Object photographed:* Location of photographer:* Compass heading:
4 Eastern view North Hwy Rd. N
5/6 Entrance w/ ditch ~~Entrance~~ " NE
7 Landfill behind industries " NE
8 " " NE

*Indicate on sketch or map if possible

Signature: *[Signature]*

Date: 2/27/85

Witness: *[Signature]*

Date: Feb 27th, 1985

MALCOLM
PIRNIE

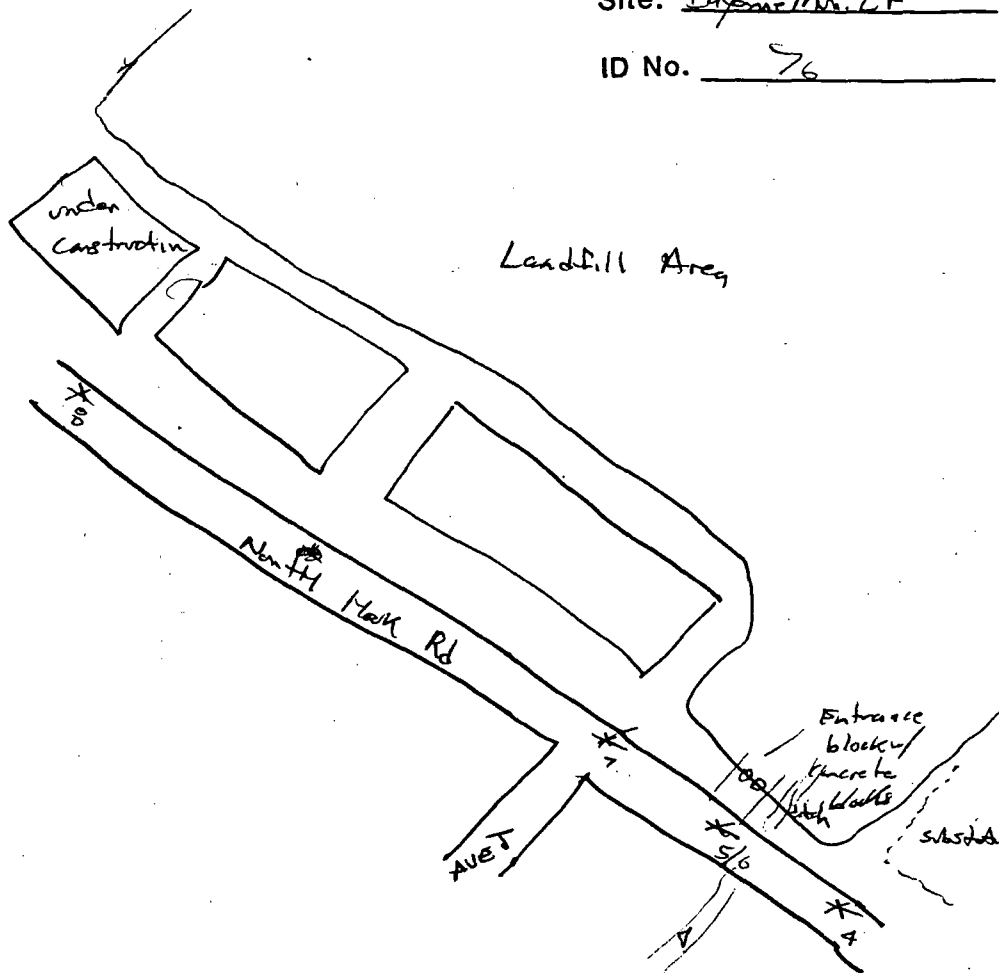
MAPS AND SKETCHES

Page 4 of 4

Site: Bryant Mr. LF

ID No. 76

N



Signature: _____

Witness: _____

Date: _____

Date: _____

2/27/85

Feb 27th 1985

PORT
NEWARK

PORT
ELIZABETH

MILITARY
OCEAN

QUAD Hudson Cty/Hagstrom
SITE 76

LAT 40°38'50" // LONG 74°08'10"

S T A W T E N S L A N

MALCOLM
PIRNIE

SITE NAME: BAYONNE MUNICIPAL L.F.

ID NO: 76

LOCATION: BAYONNE

FILE	SEARCH DATE	REVIEWER	RCRA 3001 FORM	CERCLA 103C FORM	PRELIMINARY INSP. REPORT	FIELD INSPECTION REPORT	AGENCY INTERNAL REPORTS	RESP. PARTY MEMOS	FORMAL CORRESPONDENCE	SITE SKETCHES	ANALYTICAL DATA	SECOND SEARCH DATE	REMARKS	QA CHECK
DWM TRENTON	1/30/87			✓	✓		✓	✓	✓	✓	✓			

CODES:

- ✓ REVIEWED AND COPIED
- X REVIEWED BUT NOT COPIED
- NF NOT FOUND

MALCOLM
PIRNIE

SITE NAME: Bayonne City Dump EPA# NJD980504849

FILE	SEARCH DATE	REVIEWER	RCRA 300I FORM	CERCLA 103C FORM	PRELIMINARY INSP. REPORT	FIELD INSPECTION REPORTS	AGENCY INTERNAL REPORTS	RESP. PARTY CORRESPONDENCE	FORMAL REPORTING DOCUMENTS	ANALYTICAL DATA	SECOND SEARCH DATE	REMARKS	QA CHECK
EPA-Fed Plaza	1/28/85	RJ	✓	✓	✓	③	✓	①	②			① Potential Hazardous Waste Site Tentative Disposition	
DEP-DWR Newark	2/4/85	R.S.	-NA			✓		NF	NF			② Potential Hazardous Waste Site Final Strategy Determination	
												③ Hazardous Waste Site Status	

Note: MPI's list calls this:
"Bayonne Municipal LF"

ID NO: 76

LOCATION: Bayonne, Hudson City

Probably the same site
DEP files in Newark call it Bayonne Sanitary LF

CODES:

- ✓ REVIEWED AND COPIED
- X REVIEWED BUT NOT COPIED
- NF NOT FOUND

SITE: BAYONNE MUNICIPAL LANDFILL

I.D. 76

DATE: FEBRUARY 27, 1985



FRAME: 4 TIME: 3:00 PM DIRECTION: N

DESCRIPTION: EASTERN VIEW OF LANDFILL



FRAME: 5 TIME: 3:00 PM DIRECTION: NE

DESCRIPTION: ENTRANCE FROM NORTH HOOK ROAD

SITE: BAYONNE MUNICIPAL LANDFILL

I.D. 76

DATE: FEBRUARY 27, 1985



FRAME: 6 TIME: 3:00 PM DIRECTION: NE

DESCRIPTION: ENTRANCE FROM NORTH HOOK ROAD



FRAME: 7 TIME: 3:00 PM DIRECTION: NE

DESCRIPTION: LANDFILL BEHIND INDUSTRIES

SITE: BAYONNE MUNICIPAL LANDFILL

I.D. 76

DATE: FEBRUARY 27, 1985



FRAME: 8 TIME: 3:00 PM DIRECTION: NE

DESCRIPTION: LANDFILL BEHIND INDUSTRIES

FRAME: _____ TIME: _____ DIRECTION: _____

DESCRIPTION: _____